



Drexel Chemical Company

August 8, 2016

Document Processing Desk (DCI/PRD)
ATTN: Mr. Steven Snyderman
Office of Pesticide Programs (7508P)
U.S. Environmental Protection Agency
One Potomac Yard (South Bldg.)
2777 South Crystal Drive
Arlington, VA 22202

Re: Mancozeb Generic DCI, ID# GDCI-014504-1566
Drexel Mancozeb Technical (Reg. No. 19713-613)

Dear Mr. Snyderman,

Reference is made to the above.

Please find the completed "*Data Call-In Response*" form.

If you have questions or need clarification regarding this submission, please contact me at (901) 774-4370 or e-mail Lchan@drexchem.com.

Thank you.

Respectfully yours,
FOR DREXEL CHEMICAL COMPANY

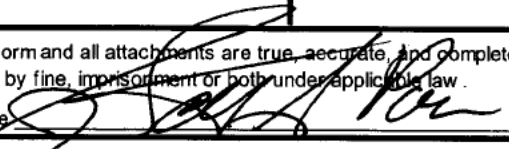
Luz G Chan

Registration Manager

United States Environmental Protection Agency
Washington, D.C. 20460
DATA CALL-IN RESPONSE

OMB Approval 2070-0174
EPA FORM 6300-4

INSTRUCTIONS: Please type or print in ink. Please read carefully the attached instructions and supply the information requested on this form.
Use additional sheet(s) if necessary.

1. Company Name and Address DREXEL CHEMICAL COMPANY P.O. Box 13327 MEMPHIS, TN 381130327		2. Case # and Name 0643 - Mancozeb Chemical # and Name: 014504 Mancozeb		3. Date and Type of DCI and Number 23-Jun-2016 GENERIC ID # GDCI-014504-1566	
4. EPA Product Registration	5. I wish to cancel this product registration voluntarily	6. Generic Data		7. Product Specific Data	
		6a. I am claiming a Generic Data Exemption because I obtain the active ingredient from the source EPA registration number listed below.	6b. I agree to satisfy Generic Data Requirements as indicated on the attached form entitled "Requirements Status and Registrant's Response."	7a. My product is an MUP and I agree to satisfy the MUP requirement on the attached form entitled "Requirements Status and Registrant's Response."	7b. My product is an EUP and I agree to satisfy the EUP requirement on the attached form entitled "Requirements Status and Registrant's Response."
19713-613		X		NA	NA
Product ingredient source information may be entitled to confidential treatment					
8. Certification: I certify that the statements made on this form and all attachments are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine, imprisonment or both under applicable law.					
Signature and Title of Company's Authorized Representative 				9. Date 6/8/2016	
10. Name of Company DREXEL CHEMICAL COMPANY				11. Phone Number (901) 774-4570	